|   | PATENT A                                       | )   | 0         | 7/3   | 38                | 750          | 62               |                     |     |                     |                        |
|---|--|---|-----------|---|-------------------|--------------|------------------|---------------------|-----|---------------------|------------------------|
|   |  | nn 2)                                     | SMAI      | LL ENT                                      | 1                 | OR           | OTHER<br>SMALL I |                     |     |                     |                        |
| FO  | R  | NUMBE                                     | R FILED   | NUMBER E                                    |                   | RAT          | E F              | EE                  | ] [ | RATE                | FEE                    |
| BAS   | SIC FEE  |   |           |   |                   |              | 38               | 30.00               | OR  |                     | 760.00                 |
| то  | TAL CLAIMS                                     | 25  | minus 20= | • 5   |                   | X\$ 9        | =                |                     | OR  | X\$18=              | 90                     |
| IND   | EPENDENT CL                                    | AIMS 3                                    | minus 3 = | *   |                   | X39          | =                |                     | OR  | X78=                |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |           |   |                   | +130         | )=               |                     | OR  | +260=               |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2                                  |  |   |           |   |                   | TOTA         | AL               |                     | OR  | TOTAL               | 850                    |
|   | CI   |   | CMA       |   |                   | OR           | OTHER<br>SMALL   |                     |     |                     |                        |
| (Column 1) (Column 2) (Column 3) CLAIMS (COLUMN 3) HIGHEST  |  |   |           |   |                   | SMA          | LL EN            | DDI-                |     | SHAFF               | ADDI-                  |
| A TA  | ROG  | REMAINING<br>AFTER                        |           | NUMBER<br>PREVIOUSLY<br>PAID FOR            | PRESENT<br>EXTRA  | RAT          | E TIC            | ONAL<br>EES         |     | RATE                | TIONAL<br>FEE          |
| AMENDMENT   | Total  | * SO                                      | Minus     | * 25  | = / /             | X\$ 9        |                  | 99                  | OR  | X\$18=              |                        |
| MEN   | Independent                                    | . 5                                       |           | *** 3                                       | = 2               | X99          | } ,              | 16                  | OR  | X78=                |                        |
| F   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |           |   |                   | +130         | )=               |                     | OR  | +260=               |                        |
|   |  |   |           |   |                   |              | TAL 🖖            | 570                 | OR  | TOTAL<br>ADDIT. FEE |                        |
|   |  | (Column 1)                                |           | (Column 2)                                  | (Column 3)        | ADDIT.       | ree L            |                     | •   | ADDII. I EL         |                        |
| B TN  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |           | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA  | RAT          | E TI             | DDI-<br>ONAL<br>FEE |     | RATE                | ADDI-<br>TIONAL<br>FEE |
| MQ  | Total  | *   | Minus     | **  | =                 | X\$ 9        | )=               | ,                   | OR  | X\$18=              |                        |
| AMENDMENT   | Independent                                    | *   | Minus     | ***   | =                 | X39          | =                |                     | OR  | X78=                |                        |
| F   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |           |   |                   | +130         | )=               |                     | OR  | +260=               |                        |
|   |  |   |           |   |                   | TO<br>ADDIT. | TAL              |                     | OR  | TOTAL<br>ADDIT. FEE |                        |
| 1   |  | (Column 1)                                |           | (Column 2)                                  | (Column 3)        |              |                  |                     |     |                     | ٠                      |
| AMENDMENT C   | !  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |           | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>-EXTRA | RAT          | E-   TI0         | DDI-<br>ONAL<br>FEE |     | RATE                | ADDI-<br>TIONAL<br>FEE |
| N N   | Total  | *   | Minus     | ##  | =                 | `x\$ 9       | )=               |                     | OR  | X\$18=              |                        |
| ME  | Independent                                    | *   | Minus     | ***   | =                 | X39          | =                | -                   | OR  | X78=                |                        |
| F   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |           |   |                   |              | )=               |                     | OR  | +260=               |                        |
|   | If the entry in colu                           | TO  | TAL       |   |                   | TOTAL        |                  |                     |     |                     |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  *** ADDIT. FEE |  |   |           |   |                   |              |                  |                     |     |                     |                        |